RECEIVED
FEC MAIL
OPERATIONS CENTER
7085 APR 20 A 10: 23

April 15, 2005

Ms. Rosa G. Lewis Campaign Finance Analyst Reports Analysis Division

Dear Ms. Lewis:

Attached you will find a response to your letter dated March 23, 2005. The response indicates that there is no affiliated or connected organization by stating "NONE" on line 6. Please let me know if you need any additional information.

Thank you.

Voice for Freedom



FÉDERAL ELECTION COMMISSION WASHINGTON, D.C. 20463

March 23, 2005

Chuck McMullen, Treasurer Voice for Freedom 2451 Cumberland Parkway Suite 3264 Atlanta, GA 30339

Response Due Date: April 22, 2005

Identification Number: C00409805

Reference:

Statement of Organization, dated 2/10/05

Dear Mr. McMullen:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. An adequate response must be received at the Commission by the response date noted above. An itemization of the information needed follows:

-Any affiliated or connected organization must be identified on your Statement of Organization. For further guidance on affiliated committees and connected organizations, please refer to 11 CFR §§100.5(g) and 100.6. If there are no other committees or organizations with which you share control or financing, please indicate "None" on Line 6. If you do share control or financing with other committees or organizations, please list their names, addresses, and relationships on Line 6. 11 CFR §102.2

Unlike previous election cycles, you will not receive an additional notice from the Commission on this matter. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. Requests for extensions of time in which to respond will not be considered. Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1152.

Sincerely,

Rosa G. Lewis

Campaign Finance Analyst Reports Analysis Division

220

5038783711

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL OPERATIONS CENTER

7005 APR 20 A 10: 23

Office Use Only

						Office Of	e Chiy	
1. NAME OF COMMITTEE (in full)	(Check in chan	il name ged)	Examp over th	is:If typing, type a lines,	12 FR4	MS		
V.D.I.C.E. FOR	FREEDO	m L	<u></u>	<u></u>	<u> </u>			<u>ا ا</u>
			<u> </u>	<u>.l</u>	<u> </u>	<u> </u>	· • • • • • • • • • • • • • • • • • • •	
ADDRESS (number and street)	2451	Cumb	ERLA	IND PA	EKWA)	1-1		لب
(Check if address	SULTE	326	4	<u> </u>	<u> </u>	L		
². is changed)	ATLAN	<i>TA</i>			64	303	<u>39</u>]-[أسلك
COMMITTEE'S E-MAIL ADDRE	:ss		CITY A		STATE ▲		ZIP CODE A	
		<u> </u>			<u> </u>	<u> </u>	<u></u>	لـــــا
<u> </u>	<u></u>			1 1 1 1 1		المالية المعلمة		أسلما
COMMITTEE'S WEB PAGE AD	IDRESS (URL)							
		111	<u> </u>	<u> </u>	<u> </u>	<u> </u>		
<u> </u>		E	<u></u>	<u> </u>		4 1 1	<u> </u>	
2. DATE 02 1		} ~						
3. FEC IDENTIFICATION N	UMBER >	C	1-70%	\$ 1 m				
4. IS THIS STATEMENT							1	
I certify that I have examined to	his Statement and	to the best	of my kna	wiedge and belie	f it is true, cor	rect and com	piele.	
Type or Print Name of Treasure	- Chi	ich 1	nem	Jullen				
Signature of Treasurer 2	10 Julie	Wille			Date 6	1 H 1 D	4 20	v > v
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.								
Office Use Only			Ped Toli	further information feral Election Comm Free 500-424-9530 rai 202-694-1100			FORM 1	

	FEC For	m 1 (Revised 02/2003)	·		Page 2
i,	TYPE OF C	OMMITTEE (Chack One)		
	(a); (b)		incipal campaign committee. (Comple		•
	,,,	Information: below.)			
	Name of Candidate			<u> </u>	
	Candidate Party Affiliation	סת יייני איני	Office Sought: House	Senate President	State Digitals
	(c)	This committee suppor	ts/opposes only one candidate, and t	s NOT an authorized committee.	
	Name of Cendidate	L			<u>. 11i. </u>
	(d) ·	This committee is a	(National, State or subordinate) con	nmiltee of the	(Democratic, Republican, etc.) Party.
	(e)	This committee is a se	parate segregated fund.		
	σ 🗶	This committee support committee.	ta/apposes mare than one Federal ca	andidate, and is NOT a separate	segregated fund or party
	Name of Any	Connected Organizati	on or Affiliated Committee	NONE	
			} 		<u></u>
	<u>i.d. l.d. l.</u>	<u>. I </u>			
	Mailing Addre	80	<u> </u>	<u>. </u>	- _ _ _ _ _ _ _ _ _
		ليب		 	
		_ 1	<u> </u>	با لينا ليب	
			CITY A	STATE ▲	ZIP CODE A
	Relationship	<u> L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u></u>	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Type of Conn	ected Organization:	_		
	Corpe	oration	** Corporation w/o Capital		anization
	Memb	parship Organization	Trade Association	Cooperativ	19
				·	

FEMANDIZPOF

•				
_	FEC Form 1 (Revised (Vrite or Type Committee Name		-	Paga 3
•	THE OF TYPO CONTINUES NEEDER	,		•
7.	Gustadian of Records: (der books and records.	ntify by name, address (phone number	optional) and position of t	he person in presession of committee
	Full Name RAUI	L KILGORE		
	Mailing Address	13.37 SOUTH MIL	LEDGE AVIE	
		SUITE ZOA	 	
		ATHEMS .	لسين الص	# <u> 3000</u> 5]-
	Title or Position▼	CITY 🛦	STATE	ZIP CODE A
			Telephone reimber	704-546-0282
8,	Treesurer: List the name an any designated agent (e.g., r	d address (phone number — optional) of sesistant treasurer).	the treasurer of the comm	littee; and the name and address of
	Full Name CHUC	LE MCMULLEN		
	Malling Address	750 PIEDMONT	AVIE	
			<u> </u>	
		ATLANTA	يوها ليبين	4 303081-
	Title or Position▼	CITY &	STATE	A ZIP GODE ▲
	<u> </u>		Telephone number	404-1817-16640
	Full Name of Designated Agent		<u> </u>	
	Mailing Address			
			<u> </u>	
				<u>لــــا-لـــا</u>
	Title or Position▼	CITY ▲	STATE	▲ ZIP CODE ▲
			Telephone number	<u></u>

ZIP CODE A

STATE A

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.
Name of Bank, Depository, etc.

CITY A

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
Hand Delivered	Date of Receipt			
USPS First Class Mail	Postmarked			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
Delivery Confirmation™ or Sig	nature Confirmation™ Label			
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
FEDEX	Next Business Day Delivery			
Received from House Records & Registration	Date of Receipt on Office			
Received from Senate Public Records Offic	Date of Receipt e			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
fu (DATE PREPARED			
(3/2005)	DATE PREPARED_			